BEST AVAILABLE COPY

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

		CLAIMS AS	S FILED - PART (Column 1)		(Column 2)			SMALL ENTITY		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS 39					4			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			39 minus 20=		* 19			X\$ 9=		OR	X\$18=	34200
INDEPENDENT CLAIMS			> mi	minus 3 = *				X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ro, ente	"0" in column 2		_	TOTAL		OR	TOTAL	1052
	C	Laims as a	MENDED	MENDED - PART II				, 0 , , , ,	<u></u>	J <b>O</b>	OTHER	<u> </u>
		(Column 1)		(Colur	nn 2) (Column 3)		)	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus ***			=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT (							]	+135=		OR	+270=	
										OR	TOTAL	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												
AMENDWENT B	5	CLAIMS REMAINING . AFTER AMENDMENT	0	HIGH NUM PREVIO	IEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	╝	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	·	OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	0	HIGH NUM PREVIO	IEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT								}			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	
***	** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Nurr	ber Previously Pa	id For" (Total o	r Independ	lent) is the	highest numb	er fo	und in the an	propriate ho	x in co	lumn 1	